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PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) INXT 1016-1	
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at Fax No. (703) 872-9306 on 16 June 2005		In re Application of Mark W. DAVIS et al. Application Number 09/893,299 Filed 27 June 2001 For Method and Apparatus for Duplicate Detection Group Art Unit 2179 Examiner Joshua D. CAMPBELL	
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 500</p> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ </p> <p> <input type="checkbox"/> A check in the amount of the fee is enclosed. </p> <p> <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. 06/17/2005 BBONNER 00000004 09893299 </p> <p> <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a 54-FC-1401 500.00 0P Deposit Account. I have enclosed a duplicate copy of this sheet. </p> <p> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0869 (INXT 1016-1). I have enclosed a duplicate copy of this sheet. </p> <p> <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p> <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) </p> <p> <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). 16 June 2005 </p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> *Total of 0 forms are submitted.</p>			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 12450, Alexandria, VA 22313-1450.